

8/24/00
5/24/01

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	ME		7/21/00
O.I.P.E. CLASSIFIER		59	7/24/00
FORMALITY REVIEW	AR	829	08/28/00
RESPONSE FORMALITY REVIEW	HA	358	12-14-00

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	4/13/01
2	✓	✓	5/13/02
3	✓	✓	10/23/02
4	✓	✓	5/6/03
5	✓	✓	
6	✓	✓	
7	✓	✓	
8	✓	✓	
9	✓	✓	
10	✓	✓	
11	✓	✓	
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42	✓	✓	
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46	✓	✓	
47	✓	✓	
48	✓	✓	
49	✓	✓	
50	✓	✓	

Claim	Final	Original	Date
31	✓	✓	5/13/02
32	✓	✓	10/23/02
33	✓	✓	5/6/03
34	✓	✓	
35	✓	✓	
36	✓	✓	
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100	✓	✓	

Claim	Final	Original	Date
101	✓	✓	
102	✓	✓	
103	✓	✓	
104	✓	✓	
105	✓	✓	
106	✓	✓	
107	✓	✓	
108	✓	✓	
109	✓	✓	
110	✓	✓	
111	✓	✓	
112	✓	✓	
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141	✓	✓	
142	✓	✓	
143	✓	✓	
144	✓	✓	
145	✓	✓	
146	✓	✓	
147	✓	✓	
148	✓	✓	
149	✓	✓	
150	✓	✓	

If more than 150 claims or 10 actions
 - staple additional sheet here

(LEFT INSIDE)